510 EAST 12TH, SUITE 1A
DES MOINES, IA 50319

Fax: (515)281-4073 www.iowa.gov/ethics

Reset Form

lowarde section 8.7 requires all gifts and bequests given to any department of the state of lowarder received by the Governor on behalf of the state be reported to the lowa Ethics and Campaign Disclosure Board and the Government Oversight Committee. The Board will provide a copy of this report to the Government Oversight Committee. This form is to be filed within 20 days of receipt of the gift or bequest.

FORM-GB

Gift or Bequest information received by a department or accepted by the Governor on behalf of the state

For office u	
Audited	
Checked	
Computer	

D

DHS Glenwood Resource Center	
ame of Department or Office Glenwood, IA 51534	
Ari Sodar Vince State, Zip Code Aliling Address 712-525-1683 City, State, Zip Code	
Area Code & Telephone No.	
ONTACT PERSON FOR RECIPIENT DEPARTMENT OR OFFICE	
Name	O' O' To (If different from about)
Mailing Address (if different from above)	City, State, Zip (if different from above)
Email Address	Area Code & Telephone Number (if different from above)
DONOR OF GIFT OR BEQUEST:	
	7
ALA-Unit 703 Wm Thompson Post Name	
105 NW-4th Street Bridgewater, IA 50837	
Mailing Address City, State, Zip Code	12/01/2009 \$50.00
	Date of Gift or Bequest Amount/Value*
Area Code & Telephone Number	*value is defined as "fair market value" of item as determined by receiving department or office. If no value mark "0.00".
Email Address (optional)	receiving department of office. If no relies were
Provide a description of the gift or bequest and purpose thereof:	
101 count 6" handmade felt Christmas stockings to de	corate homes for Clients
Criteria to use this form:	
Receipt of any gift or bequest that is received by any department of the st	ate or received by the Governor on behalf of the state.
Statement of Affirmation:	
l,affirm that the gift or bequest reported above assessment of the fair market value (if applicable) is correct and true to the b	e is accurate. I further affirm that the information concerning the donor and best of my knowledge.
assessment of the lair market value (ii applicable) is correct and add to the s	•
1 h	
Lich Mossenser	
Signature	Date